FORM F CONTRACT LOBBYIST CLIENT NOTICE OF TERMINATION SEE INSTRUCTIONS ON REVERSE File Original with the City Clerk		CALIFORNIA COUNDED TO
	For Official Use Only	Pageof
NAME OF CONTRACT LOBBYIST:		TELEPHONE NUMBER: ()
BUSINESS ADDRESS: (Number and Street) (City) (State) (Zip Code)		FAX NUMBER: ()
MAILING ADDRESS: (If different than above)		E-MAIL:
CLIENT NAME, ADDRESS, AND TELEPHONE NUMBER:		EFFECTIVE DATE OF TERMINATION:
VERIFICATION		
I certify that I have been authorized by the Lobbyist identified above to make this verification. I have reviewed the requirements of the provisions of the San Jose Municipal Code (Chapter 12.12). I certify under penalty of perjury under the laws of the State of California that I have reviewed the Notice of Termination and to the best of my knowledge the information contained herein is true and complete.		
Print Name	Title	
Signature Executed On		
		(month, day, year)

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FORM F INSTRUCTIONS

TO COMPLETE THE FORM:

The Contract Lobbyist Client Notice of Termination may be filed separately or with Quarterly Report covering the quarter when the Contract Lobbyist terminated all lobbying activity on behalf of the Client.

- Enter the Contract Lobbyist information including name, address, telephone and facsimile numbers, and electronic mail address.
- Fill in the page number information. Continue the numbering from the last page of the Quarterly Report, Schedule A, Schedule B or Schedule C, whichever is applicable.
- List the name, address, and telephone number of the Client. Specify the termination date of the representation.

If the Contract Lobbyist has more than 1 Client that has terminated lobbying services, a separate page should be filled out for each Client.

A **Client** is any person who compensates the Contract Lobbyist for representation.

Compensation is any economic consideration for services rendered or to be rendered in the future. For example, compensation may include a payment, distribution transfer, loan advance, deposit, money, property, services, or anything else of value (monetary or non-monetary).

Verification

Complete the verification by signing the statement and entering the date signed. When you sign, you are stating, under penalty of perjury that to the best of your knowledge the information contained herein is true and complete. Do not alter the verification statement. Contingent Compensation Disclosure Forms with altered verification statements will not be accepted by the Office of the City Clerk.

- Submit the originally signed Notice of Termination separately or with the Quarterly Report to the Office of the City Clerk.
- An unsigned Notice of Termination will be deemed unfiled.

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